

**MIZORAM STATE COUNCIL FOR TECHNICAL EDUCATION
APPLICATION FORM
FOR
RE-EVALUATION OF ANSWER SCRIPT**



1. Re-evaluation of
2. Name of applicant
(in Block Letter)
2. Registration No.
3. Postal address & contact no.
(for correspondence)
4. Particulars of Examination in which appeared

Name of Exam	Month-Year	Name of Institute	Category (Regular/Repeater)

5. Paper(s) in which Re-evaluation is desired

Sr. No.	Name of Subject	Subject Code	Marks obtained
1			
2			
3			

6. Details of fees = Rs. 500/- only.

DECLARATION

I, son/daughter of

Hereby declare that I have carefully gone through the rules and regulations governing Re-evaluation and I undertake to abide by the same. The result of Re-evaluation shall be binding upon me.

Date

Signature of Candidate

VERIFICATION CERTIFICATE

Certified that:

1. The application of the candidate is VERIFIED in accordance to the rules provided for Re-evaluation.
2. The original mark-sheet of the candidate is enclosed.

Date

Seal

(Principal/Director)